

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231.

Typed or Printed Name

Martha Cisneros

Signature

Date

September 7, 2001

**RESPONSE TO RESTRICTION  
REQUIREMENT**

Address to:

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

Application No.

09/523,366

Confirmation No.

4971

Filing Date

March 10, 2000

First Named Inventor

Powell

Examiner

Booth, R.

Group Art Unit

2812

DOCKET NO: AMAT/2801/USA/AKT/SB

Sir:

This is in response to the Restriction Requirement dated August 21, 2001. The Examiner therein required election of one of the following groups of claims:

Group I: Claims 1-15, drawn to a multi-chamber deposition apparatus, classified in class 118, subclass 715+.

Group II: Claims 16-20, drawn to a method of making a domed lid of a transfer chamber, classified in class 72, subclass 1+.

Applicants hereby elect to prosecute the claims of Group I, claims 1-15, with traverse.

Applicants expressly reserve the right under 35 USC §121 to file a divisional application directed to the non-elected subject matter during the pendency of this application.

The Commissioner is hereby authorized to charge any fees under 37 C.F.R. §§ 1.16 and 1.17 which may be required by this paper, or to credit any overpayment, to Deposit Account No. 50-0815, order number AMAT/2801/USA/AKT/SB.

Respectfully submitted,  
BOZICEVIC, FIELD & FRANCIS LLP

Date:

September 7, 2001

By:

Alan W. Cannon

Registration No. 34,977

BOZICEVIC, FIELD & FRANCIS LLP  
200 Middlefield Road, Suite 200  
Menlo Park, CA 94025  
Telephone: (650) 327-3400  
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F:\DOCUMENT\APPL\002\resp restr reqment.rtf

2812

# CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

Name (Print/Type) Martha Cisneros Signature [Signature] Date 09-07-2001



## TRANSMITTAL

☐ Small Entity

☒ Large Entity

Application Number	09/523,366
Confirmation Number	4971
Filing Date	March 10, 2000
First Named Inventor	Powell
Examiner	Booth, R.
Group Art	2812
Attorney Docket No.	AMAT/2801/USA/AKT/SB

### ENCLOSED:

	Claims	No. of claims as filed or after amendment	Most claims previously paid for	# Extra Claims	Rate	Totals
<input type="checkbox"/> Amendment Under Rule	Total	20	20			\$ -
<input type="checkbox"/> 37 CFR §	Independent	2	3			\$ -
<input type="checkbox"/> Pages	Multiple					
	Total Extra Claim Fees					\$ -

☐ Applicants Petition for an Extension of time from \_\_\_\_\_ to \_\_\_\_\_ A    month extension was previously filed and paid for thereby reducing the basic fee

☐ Response to File Missing Parts (with copy of formalities letter)

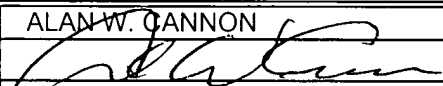
<input type="checkbox"/> Filing Fee	Fee
<input type="checkbox"/> Executed Declaration _____ Pages _____	Surcharge Fee
<input checked="" type="checkbox"/> Other <u>RESPONSE TO RESTRICTION REQUIREMENT DATED 08/21/01</u>	Fee
_____	Fee
_____	Fee
_____	Fee
	Subtotal \$ -

☐ Information Disclosure Statement

<input type="checkbox"/> PTO Form 1449 _____ Pages _____	Fee
<input type="checkbox"/> _____ Copies of Cited References	Subtotal \$ -
<input type="checkbox"/> Other _____	

☐ Response to Notice to Comply (with copy of Notice to Comply)

<input type="checkbox"/> Sequence Listing Certification	Fee
<input type="checkbox"/> Paper Copy of Sequence Listing _____ Pages _____	
<input type="checkbox"/> Diskette in computer-readable format	
<input type="checkbox"/> Other _____	

<input type="checkbox"/> Terminal Disclaimer		Fee	
<input type="checkbox"/> Appeal to Board of Appeals and Appeal Communication to Group			
<input type="checkbox"/> Notice of Appeal	Pages		Fee
<input type="checkbox"/> Appeal Brief in Triplicate	Pages		Fee
<input type="checkbox"/> Reply Brief	Pages		Fee \$ -
Subtotal			\$ -
<input type="checkbox"/> Other Enclosures and/or Fees		Fee	
<input type="checkbox"/> Change of Correspondence Address			
<input checked="" type="checkbox"/> Return Receipt Postcard		TOTAL FEES \$ -	
<p><b>The Commissioner is authorized to charge any fees which may be required, or credit any overpayment to Deposit Account 50-0815. If additional fees are required, including extensions of time, please consider this a petition therefore. A duplicate copy of this transmittal is enclosed.</b></p>			
<b>SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED</b>			
Name (Print/Type)	ALAN W. CANNON		Registration No. 34,977
Signature			Date 09-07-2001
Firm Name	Bozicevic, Field & Francis LLP	Address	200 Middlefield Road, Suite 200
City	Menlo Park	State	California
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